



*MaineCare Services*  
An Office of the  
Department of Health and Human Services

**FOR DISCUSSION**  
**DRAFT**  
**PURPOSES ONLY**

# MaineCare

## Value Based Purchasing Member Services Committee

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October 7, 2011

# Objectives & Agenda

## Objectives

- Explain and discuss the Department's new plan to improve members' health and lower costs

## Agenda

- Where we have been
- Why things have changed
- Our new plan
  1. Emergency Department Project
  2. Accountable Communities Program
  3. Building off current projects
- How we are using your input from Managed Care
- Discussion
- Next steps

# Where We Have Been

Last February 2011, we announced that we were taking a break from the Managed Care Project. We wanted to make sure we were taking advantage of other projects in the State to improve health and lower costs.

- The Department was clear it still had the goals to:
  - Measure and reward quality of care
  - Focus on health
  - Have the state, health care providers and members work toward the same goals
- Members and stakeholders stopped meeting and we stopped working on the Request for Proposals (RFP).

# Why we are not going to do Managed Care anymore?



- With a new Governor and new Commissioner, we wanted to take a fresh look at the Managed Care project.
- Instead of looking for another organization to save money and improve care, the new focus is to:
  - Build on projects that are happening already
  - Work directly with doctors and other health care providers to improve care and lower costs.

# Our New Plan

Not very long ago, we announced a new “Value Based Purchasing” Strategy.

- “Value Based Purchasing” means the state makes sure:
  - Doctors and other health care providers are responsible for giving good care
  - Doctors and other health care providers are responsible to provide care at a lower cost
- How does the state make sure this happens?
  - Make it easier for everybody to know about how good (or bad) care is, and how much it costs.
  - Reward health care providers when they provide good care at lower costs.
  - Come up with different ways to pay for healthcare. Right now, health care providers get more money whenever they do more (more tests). Sometimes this is not good for the member if the member doesn’t need it.

# Our New Plan, continued

Our Value Based Purchasing Strategy has three main parts to it. Some of the projects are new. Other projects are ones we have already been doing and we are going to make better.

1. Emergency Department Project
2. Accountable Communities Project
3. Improving projects we have already:
  - a) Patient Centered Medical Homes
  - b) Primary Care Provider Incentive Program
  - c) Letting everyone know how well providers are doing

# 1. Emergency Department Project

Sometimes, members go to the Emergency Department for problems that are not emergencies. Their primary care doctor could better help them with these problems. Going to your doctor instead of the hospital also cost the state less money.

Other times, members go to the Emergency Department because they have a lot of different problems. If their different health care providers worked with each other to help the member with these problems, the member may get healthier. The member would then not have to use the Emergency Department as much.

MaineCare will be working with hospital Emergency Departments across the state to:

- Help them figure out which members use the Emergency Department the most.
- Help them figure out why these members use the Emergency Department so much.
- Work with the member's other health care providers and supports to help them get better care without using the Emergency Department.

# Emergency Department Project Timeline

**8/11:  
Hospital  
visits**

**9/11: Decide most  
important hospitals  
to focus on**

**10/11:  
Start work  
across the  
state**

## 2. Accountable Communities

MaineCare is planning an Accountable Communities Program. The goals of this program are for groups of provider organizations, called Accountable Care Organizations (ACOs), to provide better care to members for lower costs.

### How Does this Work?

- There are different kinds of ACOs. MaineCare does not know what kind of ACOs it will have right now. We want to work with health care providers to plan the kinds of ACOs we will have so that they will join us in this project.
- There are some things that are the same for all ACOs:
  - The ACOs have to meet quality goals, just like we discussed for Managed Care.
  - The ACOs will have goals to save money.
- ACOs are usually formed by different providers that work together to make sure patients are healthy. Providers could be primary care doctors, specialists, hospitals, and others.

# Accountable Communities Timeline

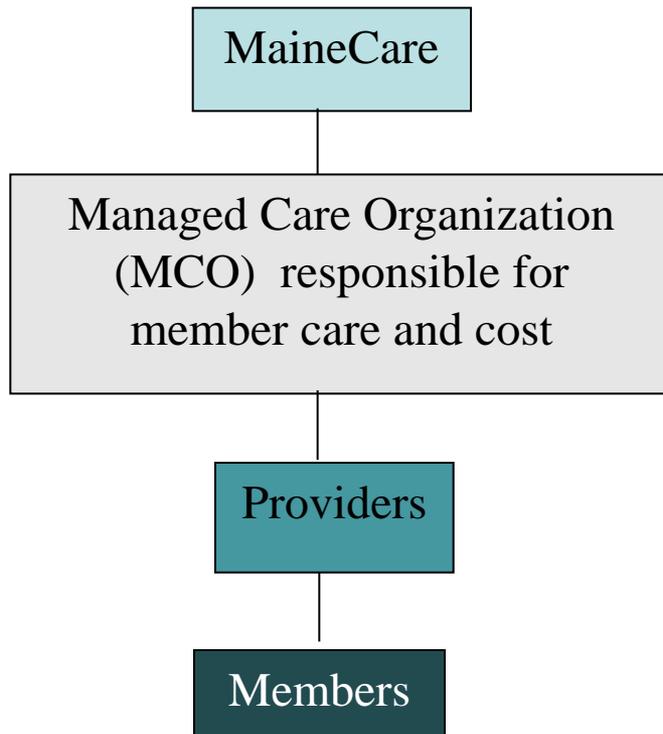
10/11: Start  
discussing with  
stakeholders

12/11:  
Issue  
RFP

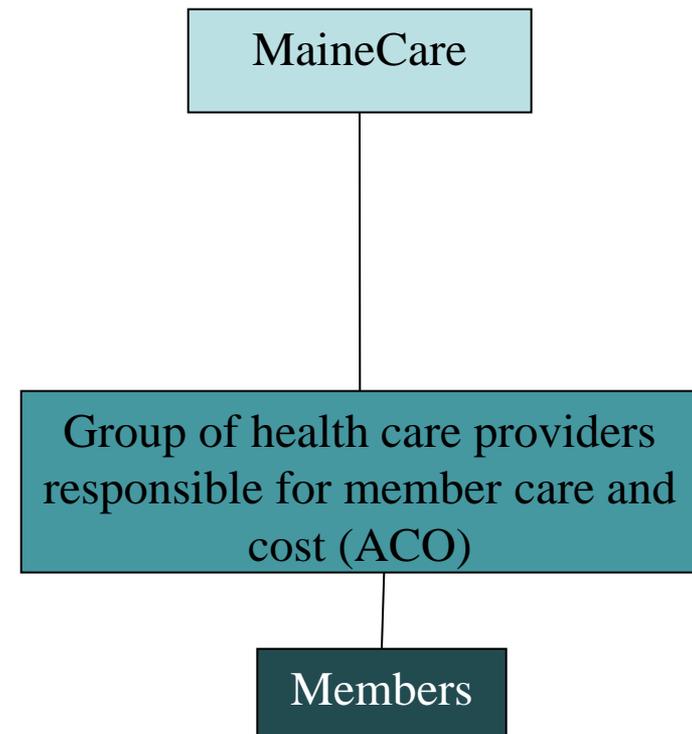
7/12: ACOs  
start

## 2. Accountable Communities: How is an ACO different from Managed Care?

### Managed Care Organization (MCO)

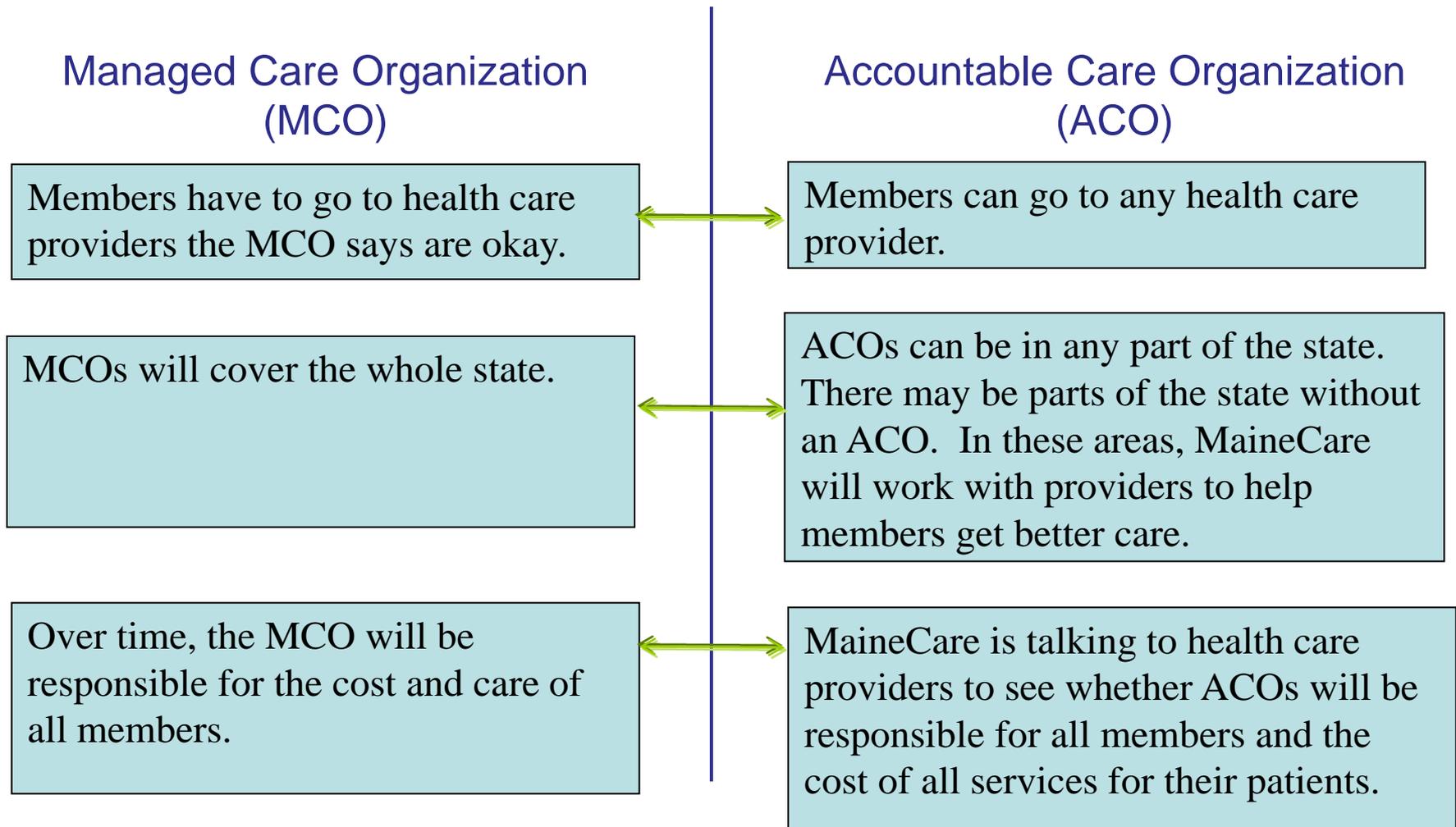


### Accountable Care Organization (ACO)



Under ACOs, MaineCare works directly with the providers to make sure member care is good and costs are lower, instead of having an MCO do this.

## 2. Accountable Communities: How is an ACO different from Managed Care?



# 3. Improving Current Projects: Patient Centered Medical Homes

**Patient-Centered Medical Homes (PCMHs)** are primary care practices that:

- Care for members using a team approach where the member's different doctors and supports all talk to each other.
- Encourage the member and provider to have a good relationship.
- Keep track of what's going on with a member using computers so information is not lost.
- Make it easier for members to schedule appointments when they need them.

MaineCare has 26 PCMHs right now. Starting in January, MaineCare will also have eight **Community Care Teams** that work with all the PCMHs to help them provide better care to members by working with the whole community.

With both the PCMHs and the Community Care Teams, MaineCare can focus on providing better care for members with serious physical and mental health issues. The Centers for Medicare and Medicaid Services (CMS) calls this a "**Health Home**" approach. CMS will help states pay for the Health Homes with extra money. The state would like to use the extra money to fund more PCMHs.

MaineCare hopes to start the Health Homes in the Spring of 2012.

# Patient Centered Medical Home Timeline



### 3. Improving Current Projects: Primary Care Provider Incentive Program



The Primary Care Provider Incentive Payment (PCPIP) program pays extra to doctors who do a good job:

1. Seeing MaineCare members at their doctor's office.
2. Making sure members who do not have an emergency get care at the doctor's office instead of the Emergency Department.
3. Providing good care to members.

MaineCare has not changed how it does the PCPIP since 2007. Doctors receiving the PCPIP do a much better job seeing MaineCare members at their office now than they used to. But in other areas, the doctors have not improved very much or at all.

MaineCare is going to see how it can change the program to make sure that doctors are improving in all areas.

# Primary Care Provider Incentive Program Timeline

9/11: Study  
options

1/12: Get permission  
from CMS

7/12: new  
PCPIP  
starts

### 3. Improving Current Projects: Letting everyone know how well providers are doing



MaineCare wants to make it easy for members to know how well their health care providers and local hospitals are doing.

MaineCare is discussing:

- Making it easier for members to see how their health care providers and hospitals are ranked
- Giving the public lists of MaineCare’s “best” health care providers

MaineCare would probably use the same ratings that other organizations in Maine use, at the Get Better Maine website:

<http://getbettermaine.org/>

# Improving Current Projects Timeline



9/11: Planning/  
collaboration

4/12: Implementation

# What about all the work we did for Managed Care?

What you said	What we're doing
Include more services and populations from the start	<ul style="list-style-type: none"><li>• Health Homes are to help members with the most needs</li><li>• MaineCare plans to include members on both Medicare and MaineCare, and members with mental health problems in its Accountable Communities program.</li></ul>
Physical and behavioral health need to be better coordinated	<ul style="list-style-type: none"><li>• Providers in the Accountable Communities Program will need to show how they will do this.</li></ul>
Transportation needs to be more reliable, with access after hours and on weekends.	<ul style="list-style-type: none"><li>• MaineCare is working on a new transportation system that will start next spring. Transportation will need to be available after hours and on weekends. MaineCare will track to make sure drivers are on time.</li></ul>
Communication needs to be clear, in plain language, and easy to get.	<ul style="list-style-type: none"><li>• MaineCare has a group that makes sure all materials for members are clear and in plain language.</li><li>• We are making sure all our staff know this.</li><li>• The website has more information now.</li></ul>

# Next Steps

MaineCare will meet with you again in November and December to keep discussing the Value Based Purchasing Strategy.